

Statement of Organization - Candidate Committee

Amendment

☒ Yes☐ No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information

| | |
|---|-------------------|
| a. Full Name | c. ID Number |
| Ernie Masche for Alderman Ward 2 | 7DU6G6 |
| b. Mailing Address (include City, State and Zip Code) | d. Date Organized |
| 3420 N Center ST Hickory, NC 28601 | 7/13/2015 |
| | e. Phone Number |
| | 828-310-8823 |

2. Candidate Information

☐ Candidate's Primary Committee

| | | |
|--|---------------------------------|---------------------------------------|
| a. Full Name | e. Candidate ID Number | f. Party Affiliation |
| Ernie Masche | 7DU6G6 | (Indicate Non-partisan if applicable) |
| b. Mailing Address (include City, State, and Zip Code) | g. Office Sought | |
| 3420 N Center ST Hickory, NC 28601 | City of Hickory Alderman Ward 2 | |
| c. Phone Number | d. Email Address | h. Next Election Year |
| 828-310-8823 | erniemasche@gmail.com | |
| <input type="checkbox"/> Email copy of notices | | i. Jurisdiction |
| | | |

3. Treasurer Information

| | |
|--|--|
| a. Full Name | 4. Custodian of Books Information |
| Ernie Masche | a. Full Name |
| b. Mailing Address (include City, State, and Zip Code) | b. Mailing Address (include City, State, and Zip Code) |
| 3420 N Center ST Hickory, NC 28601 | |
| c. Phone Number | d. Email Address |
| 828-310-8823 | |

I prefer to receive notices by email ☐ Yes ☐ No ☐ Email copy of notices

5. Assistant Treasurer Information

☐ Add☐ Remove

| | |
|--|---|
| a. Full Name | 6. Account Information (incl. CRO-3500) |
| | a. Financial Institution Full Name |
| | First Citizens Bank |
| b. Mailing Address (include City, State, and Zip Code) | b. Purpose |
| | Campaign Account |
| c. Phone Number | d. Type |
| | EWM |
| | Checking |

☐ Email copy of notices

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.

ERNEST MASCHE

Printed Name of Signer

Ernest Masche

Signature of Appointed Treasurer

7/13/2015

Date